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Bib Data Sheet

CONFIRMATION NO. 9398

SERIAL NUMBER 09/905,715	FILING DATE 05/04/2001 RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 1908-95650
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APPLICANTS

Steven M. Rothman, Clayton, MO;

** CONTINUING DATA *None - RWT*** FOREIGN APPLICATIONS *None - RWT***IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****

** 07/12/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature <i>RWT</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
MO	16	12	3

ADDRESS

25716

TITLE

System and method for cooling the cortex to treat neocordical seizures

FILING FEE RECEIVED 575	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 9398

SERIAL NUMBER 60/288,944	FILING DATE 05/04/2001 RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO. WSHU 2050
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APPLICANTS

Steven M. Rothman, St. Louis, MO;

** CONTINUING DATA ****None - 101*** FOREIGN APPLICATIONS ****None - 101*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 07/12/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Roy</i>		
Verified and Acknowledged	Examiner's Signature <i>Roy</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
MO	16		

ADDRESS	000321
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TITLE	System and method for cooling the cortex to treat neocordical seizures
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FILING FEE RECEIVED 75	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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